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UNITED STATES DISTRICT COURT SOUTHERN DISTRICT OF WEST VIRGINIAERESA L. DEPPNER, CLERK

	Southern District of West Virginia
y Jasquette Damon Erane.	3483/25
(Enter above the full name of the plaintiff or plaintiffs in this action).	(Inmate Reg. # of each Plaintiff)
VERSUS CIVIL A (Number	to be assigned by Court)
Jaylana yr Jay	
(Enter above the full name of the defendant or defendants in this action)	
COMPLAIN	<u>VT</u>
I. Previous Lawsuits	
A. Have you begun other lawsuits in state facts involved in this action or otherw	e or federal court dealing with the same rise relating to your imprisonment?
YesNo	

В.	If your answer to A is yes, describe each lawsuit in the space below. (If the is more than one lawsuit, describe the additional lawsuits on another piece paper, using the same outline).			
	1.	Parties to this previous lawsuit:		
		Plaintiffs:	grange He Danon Forces	
		Defendants:	Jaylana Y Jay	
	2.	county);	eral court, name the district; if state court, name the	
	3.	Docket Number	er:	
	4.	Name of judge	e to whom case was assigned:	
	5.	Is it still pendi	or example: Was the case dismissed? Was it appealed?	
	6.	Approximate d	ate of filing lawsuit:	
	7.	Approximate d	ate of disposition:	

Pla	ce of Present Confinement: () Estern Esquaral Sact
A.	Is there a prisoner grievance procedure in this institution?
	YesNo
В.	Did you present the facts relating to your complaint in the state prisoner grievance procedure?
	Yes No
C.	If you answer is YES:
	1. What steps did you take?
	2. What was the result?
D.	If your answer is NO, explain why not: 43-course there is a
Par	ties buddy heidder seistern agen in herr bet Deen to make and female stratted not hence Dello the problem II have it the problem II have it the misse the problem I have it
and	tem A below, place your name and inmate registration number in the first blank place your present address in the second blank. Do the same for additional atiffs, if any.)
A. Name of Plaintiff: \(\) \(\alpha \) \(
	Name of Plaintiff: Y Jacquette Damon Eares Address: 10 Hanlan Place Brahamsville, DV2 255
B. Additional Plaintiff(s) and Address(es):	

(In item C below, place the full name of the defendant in the first blank, his/her official position in the second blank, and his/her place of employment in the third blank. Use item D for the names, positions, and places of employment of any additional defendants.)

is employed as:	· Y) CIRTIE
at Alest	en Recense Jack
Additional defenda	unts:

IV. Statement of Claim

State here as briefly as possible the <u>facts</u> of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, set forth each claim in a separate paragraph. (Use as much space as you need. Attach extra sheets if necessary.)

en 12-20-15 Muse Taylana of July estimated to give me my medicat ear at exercise pill pros that is pesseed to my historie because I have really bod problems with my stimach and she told me there was none on the pell cart and she want stypping pell pass to go to medical too just to get me sime tarlisec.

I asked officer Tarvier who was running pell pass which the nurse would be take me to medical to get my medication once pell pass was over and he textaine of the she tailed him to that he was over and he textaine of the she tailed him to that he was to carrie goons to take me

IV.	Statement of Claim (continued):
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1	has relateenship a orth some of the head
	sking male Authoreties in the jet that
	the her thank she condo whitever she Dentes
	do en they just and to the innotes she
//	sbeen verydesrespectful Ensands me
<u>60</u>	numerous occasions and I'm Exped
04	et and that why I'm Caken, action

State briefly exactly what you want the court to do for you. Make no legal arguments.

V.

Relief

Cite no cases or statutes.

I would like the hope to be fored and

me to get poid to the sufficient Thoul

to go thought he night the returned.

To go thought he night the returned.

The give me my medication. I maskered

25,000 for my para and stiffering. I

would allow like the the courts to being officer.

Tarxis to court as one of my witnesses and

several of the reserving she course she all so may

it clear to them that the refused me my medication
because she wasn't going to stop pill pass just to go to medication, when she child have had afficer Tarx

thring me to medication, when she child have brought it to medication or one she should have brought it to medication of the she should have brought it to medication or she should have brought it to medicate on or she should have brought in the medical news who does her job Right would have

V.	Reli	Relief (continued)):		

VII.	Cou	nsel		
	Α.	If someone other than a lawyer is assisting you in preparing this case, state the person's name:		
	В.	Have you made any effort to contact a private lawyer to determine if he or she would represent you in this civil action?		
		Yes No If so, state the name(s) and address(es) of each lawyer contacted:		
		If not, state your reasons: Total that the		
		money to afford an Attorney		
	C.	Have you previously had a lawyer representing you in a civil action in this court?		
		Yes No		

If so, state the lawye	er's name and address:
Signed this day	y of, 20
	Signature of Plaintiff or Plaintiffs
	that the foregoing is true and correct.
Executed on 12-21- (Date)	
	Signature of Moyant/Plaintiff
	Signature of Woyang Taliffair
Signature of Attorney (if any)	

THIS PERSON IS AN NIMATO

ASOMIS AN AMARIA

POREVER PROPERTY POREVER



Juntington, West Virginia 25701